## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10772 638

|                             |   |   | SMALL ENTITY                       |                                    |                  | OTHER            | OTHER THAN |                    |                        |            |                    |                        |
|-----------------------------|---|---|------------------------------------|------------------------------------|------------------|------------------|------------|--------------------|------------------------|------------|--------------------|------------------------|
| _                           |   | <del></del>                               | (Column 1)                         |                                    | (Column 2)       |                  |            | TYPE               |                        | OR         | •                  |                        |
| TOTAL CLAIMS                |   |   | 10                                 |                                    |                  |                  | ·          | RATE               | FEE                    |            | RATE               | FEE                    |
| FOR                         |   |   | NUMBER FILED                       |                                    | NUMBER EXTRA     |                  |            | BASIC FEE          | 385.00                 | OR         | BASIC FEE          | 770.00                 |
| TOTAL CHARGEABLE CLAIMS     |   |   | // minus 20=                       |                                    | . 0              |                  |            | X\$ 9=             |                        | OR         | X\$18=             |                        |
| INDEPENDENT CLAIMS          |   |   | / m                                | inus 3 =                           |                  | 7                |            | X43=               |                        | OR         | X86=               |                        |
| M                           | JLTIPLE DEPE  | NDENT CLAIM P                             | RESENT                             |                                    |                  |                  |            | +145=              |                        | OR         | +290=              |                        |
| * If                        | the difference  | e in column 1 is                          | less than zero, enter "0" in colun |                                    |                  | column 2         |            | TOTAL              |                        | OR         | TOTAL              | 770                    |
| CLAIMS AS AMENDED - PART II |   |   |                                    |                                    |                  |                  |            |                    |                        |            | OTHER              | THAN                   |
| _                           |   | (Column 1)                                |                                    | (Colum                             |                  | (Column 3)       |            | SMALL              | ENTITY                 | OR         | SMALL              |                        |
| <b>AMENDMENT A</b>          |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGHE<br>NUME<br>PREVIO<br>PAID F  | BER<br>SUSLY     | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |            | RATE               | ADDI-<br>TIONAL<br>FEE |
|                             | T tal   | *   | Minus                              | **                                 |                  | =                |            | X\$ 9=             |                        | OR         | X\$18=             |                        |
| AME                         | Independent   | * ENTATION OF MI                          | Minus                              |                                    |                  | =                |            | X43=               |                        | OR         | X86=               | *                      |
|                             | FIRST PRESE   | ENTATION OF MI                            | JUIPLE DEF                         | PENDENT                            | CLAIM            |                  |            | +145=              |                        | OR         | +290=              | ,                      |
|                             |   |   |                                    |                                    |                  |                  | L          | TOTAL              |                        |            | TOTAL              |                        |
|                             |   | (Column 1)                                |                                    | (Colum                             | ın 2)            | (Column 3)       | Α.         | DDIT. FEE          |                        |            | ADDIT. FEE         |                        |
| AMENDMENT B                 | ÷.  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGHE<br>NUMB<br>PREVIO<br>PAID F  | ER<br>USLY       | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |            | RATE               | ADDI-<br>TIONAL<br>FEE |
|                             | Total   | *   | Minus                              | **                                 |                  |                  |            | X\$ 9=             |                        | OR         | X\$18=             |                        |
|                             | Independent   | *   | Minus                              | ***                                |                  | = :              |            | X43=               |                        | OR         | X86=               |                        |
|                             | FIRST PRESE   | NTATION OF ML                             | LTIPLE DEP                         | ENDENT                             | CLAIM            |                  |            | +145=              |                        | OR         | +290=              |                        |
|                             |   |   |                                    |                                    |                  |                  | L          | TOTAL              | · .                    | OR ,       | TOTAL              |                        |
| ****                        | · • • • • • • • • • • • • • • • • • • •   | (Column 1)                                |                                    | (Colum                             | n: 2\            | (Column 3)       | Al         | DDIT. FEE <b>L</b> |                        | ļ <i>ļ</i> | ODIT. FEE          |                        |
| AMENDMENT C                 |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ST<br>ER<br>JSLY | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>FEE           |            | RATE               | ADDI-<br>TIONAL<br>FEE |
|                             | Total   | *   | Minus                              | **                                 |                  | =                | Γ          | X\$ 9=             |                        | OR         | X\$18=             |                        |
|                             | Independent   |   | Minus                              | ***                                | ·                | =                | 卜          | X43=               |                        |            | X86=               |                        |
|                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                    |                                    |                  |                  |            | +145=              |                        | OR         |                    |                        |
| * If                        | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                    |                                    |                  |                  |            |                    |                        | OR L       | +290=              |                        |
| ** [[                       | the "Highest Nur  | mber Previously Pai<br>mber Previously Pa | d For IN THIS                      | SPACE is I                         | ess than         | 20, enter *20.*  | ΑD         | TOTAL<br>DIT. FEE  |                        | OR A       | TOTAL<br>DDIT. FEE |                        |
| T                           | he *Highest Num   | ber Previously Paid                       | For" (Total or                     | Independen                         | t) is the I      | highest number   | found      | d in the appr      | priat box              | in colu    | mn 1.              |                        |